| | | | | | 09/875/38 | | | | | |
|---|-----------------------|-----------------------|---------------|------------------|-----------|--------------------|-----------------|----------|---------------------|---|
| Application or Doctor Number PATENT APPLICATION ÆE DETERMINATION RECORD 490060110 | | | | | | | | | | |
| Effective October 1, 2000 | | | | | | | | | | Ę |
| CLAIMS AS FILED - PART I | | | | | | | MITTY | <u> </u> | OTHE | THAN |
| TOTAL CLAIMS | (Column 1) (Cotur | | | mn 2) | | | | OR | SMALL | |
| FOR | NUMBER FILED | | 200 | | | RATE | FEE | 1 | RATE | FEE |
| TOTAL CHARGEABLE CLAIMS | 1 | | RUM | ER EXTRA | | BARC FE | 355.00 | OR | PARIC FEE | 710.00 |
| PIDEPENDENT CLAIMS | ••• | nus 20⇒ | . 77 | | | X\$ 9= | <u> </u> | ОЯ | X\$18= | - |
| MULTIPLE DEPENDENT CLAIM | minus 3 = RESENT | | 7 | | X40- | <u> </u> | OR | X80- | _ | |
| | | | | | | +135= | | OR | +270= | — |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | • | TOTAL | | OR | TOTAL | 7/0 |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) | | | | | | SHALL | ĖNITTY | OR | OTHER | |
| CANS | | REGIR | E31 | PRESENT | ſ | | ADDI- | 1 | | ADD1- |
| AFTER AMENDMENT | | PREVIO PAID | JUSLY 1988 | EXTRA | | RATE | TIONAL FEE | | RATE | TIONAL FEE / |
| REMAINING AFTER AMENOMENT Total 14 Independent 2 | Minus | -2 | .0 | - () | | X\$ 9= | | OR | X\$18= | \ |
| | Minus | ; | 3 | - | | X40= | | OR | X80= | \bigvee |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | +135= | | OR | +270= | Λ |
| 1 | | | | | L | TOTAL | _ | | TOTAL ADOIT, FEE | / \ |
| (Column 1) (Column 2) (Column 3) | | | | | | DOIT, FEE | · · · · · · | , | ACKET, FEE | |
| CLUMS REMAINING AFTER | | HIGH NUM PREVIO | BER | PRESENT | lſ | RATE | ADDI- TIONAL | | 2 | ADDI |
| AMENDALENT | | PAID | | EXTRA | | HÁIE | FEE | | RATE | TIONAL |
| REMAINING AFTER AMENDMENT Total • U Independent • U | Minus | -3 | <u>O</u> | • () | lL | X\$ 9= | | OR | X\$18= · | \setminus |
| findspendent • FIRST PRESENTATION OF M | | PENDENT | CLAM | - | lL | X40= | | OR | X80= | X |
| | | | | | | +135= | | OA | +270= | $/ \setminus$ |
| | | ٠ | | | A | TOTAL DOIT, FEE | | OR | YOYAV ACOIT, FEE | |
| (Column 1) | 7 ii = i i i i | (Colum | | (Column 3) | · - | | | | | |
| O REMARKING | | NUMB PREVIO | ER | PRESENT EXTRA | ١ſ | RATE | ADDI- TIONAL | | RATE | ADDI- TIONAL |
| AMENDMENT | | PAID | | - SAIM | | TATE | FEE | | TVIE | FEE |
| PENANNING AFTER AMENDMENT Total - Independent - | Minus | ** | | • | | X\$ 8= | | OR | X\$18= | Ĭ |
| FIRST PRESENTATION OF M | | | CLANA | | | X40= | | OR | X80= | |
| | | | | | | | | OR | +270= | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. " If the "Righest Number Previously Paid For" IN THIS SPACE is take than 20, enter "20." | | | | | | | | OR | TOTAL NOOTE FEE | |
| "Tit the Teighest Number Previously Paid For 19 This SPACE is less than 3, entir 13. ADDIT. FEE | | | | | | | | | | |
| ORM PTO-079 Patient and Trademark Office, U.S. DEPARTMENT OF COMMERCE | | | | | | | | | | |

Available Copy